

23. Epilepsy, Alcoholic.
24. Spinal Menengitis, no type.
25. Brights disease.

1911.

Jan.	15
Feb.	14
Mch.	7
Apr.	12
May	14
June	7
July	7
Aug.	14
Sept.	13
Oct.	18
Nov.	15
Dec.	14

150

HYGIENIC LABORATORY OF THE STATE BOARD OF HEALTH.*

Report by W. A. SAWYER, M. D., Berkeley.

At the beginning of the current year the State Board of Health established a Division of Epidemiology under the Bureau of the Hygienic Laboratory. As a result, we anticipate being able to do more than ever before in studying and controlling epidemics. The Division has already made decided progress along two lines of investigation, both of which depend to a great extent on the laboratory side of the work.

The first epidemiological study was that of the present epizootic of rabies. The pin map in the laboratory and our records of examinations of animals' heads show how the disease in California first became prevalent in Los Angeles in the summer of 1909. It spread over a large part of Southern California and finally crossed the Tehachapi mountains in January, 1911, when it appeared in Bakersfield. From there it moved steadily northward and became very prevalent in Kings, Tulare, and Fresno counties. North of this there had been, until recently, no indication of the disease except a few scattered cases. The disease is now present in Merced, Stanislaus, San Joaquin, and Contra Costa counties, and in San Francisco.

We have made 210 examinations of animals' heads for rabies at the State Hygienic Laboratory in the past two and one-half years. 149 of these showed positive evidence of rabies. The increase in the number of cases is indicated by the fact that in the first year and a half we had 44 positive cases, and in the last year, 105. The months showing the most examinations were those of the past winter.

In San Francisco we had a case in October, 1911, and no other until January 30, 1912. During February and March and the first half of

April, the laboratory of the Health Department of San Francisco examined 104 brains for rabies; 75 gave positive results. Two of the San Francisco cases were human and were confirmed by examinations in the city and state laboratories. Ten human deaths have occurred in California up to date; 7 in Southern California, one in the San Joaquin Valley, and two in San Francisco.

The second epidemiological investigation which I wish to call to your attention is a study of cases of typhoid fever among sailors. Some time ago it was noticed at the Marine Hospital in San Francisco that a great many typhoid cases came from a single ship. This was brought to the attention of the State Board of Health last December. Our investigation was carried on in two ways, by field work among the ships and by laboratory examinations. We found that a "carrier" on board a lumber steamer was responsible for twenty-seven cases. Four of these died. The cases from this "carrier" which were sent to the Marine Hospital represented one-fourth of all the cases of typhoid admitted to that hospital during nearly four years, and one-third of the deaths.

These two studies are examples of the kind of work which will be carried on by the Division of Epidemiology.

DIAPHRAGMATIC PLEURISY.*

A Stumbling Block in the Consideration of the Acute Abdomen.

By DANIEL CROSBY, M. D., Oakland.

In these days of rapid surgical advance, more and more those men who are doing only occasional surgery are operating upon patients who were heretofore left for the consideration and discretion of the surgical specialist.

The immediate and amazing relief which follows successful surgical intervention in acute conditions in the abdomen has placed the general public in a receptive mood leading to the ready acceptance of advice for operation with the result that many abdomens are opened before the operator has taken the pains to establish premises for his procedure, and in no group of cases perhaps is there more chance of error, and more demand for painstaking inquiry and observation than in those cases of abdominal pain in which a lesion above the diaphragm may be a causative factor.

Appendicitis, its dangers and disasters has set even the most poorly informed of the general public by the ears and a medical attendant who does not recognize it speedily, comes in for a full measure of condemnation. Furthermore, an increased interest in and understanding of evidence of ulceration of stomach and duodenum with the not infrequent resultant perforative peritonitis keeps medical men upon the qui vive to identify such catastrophes

* Read before the Forty-Second Annual Meeting of the State Society, Del Monte, April, 1912.

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